

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>6/9/05</u>		2 Serial/Patent # <u>10/505,404</u>						
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED					
✓	Filing		6 AMOUNT \$					
	Amendment		\$					
	Extension of Time		\$					
	Notice of Appeal/Appeal		\$					
	Petition		\$					
	Issue		\$					
	Cert of Correction/Terminal Disc.		\$					
	Maintenance		\$					
	Assignment		\$					
✓	Other <i>Fee Code Correction</i>		\$					
		7 TOTAL AMOUNT OF REFUND						
		\$ <u>40.00</u>						
		8 TO BE REFUNDED BY:						
		Treasury Check						
		Credit Deposit A/C #:						
		9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">3</td><td style="width: 20px; text-align: center;">--</td><td style="width: 20px; text-align: center;">3</td><td style="width: 20px; text-align: center;">3</td><td style="width: 20px; text-align: center;">2</td><td style="width: 20px; text-align: center;">5</td></tr></table>		0	3	--	3	3
0	3	--	3	3	2	5		
10 REASON:								
	Overpayment							
	Duplicate Payment							
	No Fee Due (Explanation):							
<i>Fee Code Correction</i>								
<i>1610 - \$770 to</i>								
<i>1609 - \$730</i>								
11 REFUND REQUESTED BY:								
TYPED/PRINTED NAME: <u>BCampbell</u>		TITLE: _____						
SIGNATURE: <u>BAC</u>		PHONE: _____						
OFFICE: <u>PCT/DO/EO</u>								
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****								
APPROVED: _____		DATE: <u>06/26/2004</u> Adjustment Date: <u>06/10/2005</u> BCAMPBELL 01 FC:1610 770.00 CR 10505404						

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: